

VIA FACSIMILE ONLY

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Total Pages Faxed: 7

K. Coffey/A. Moline

The demand must be filed directly with the competent International Preliminary Examining Authority or, if two or more Authorities are competent, with the one chosen by the applicant. The full name or two-letter code of that Authority may be indicated by the applicant on the line below:

IPEA/EP _____

**DETAILED, NON-RATIONALIZED
EXAMINATION REQUESTED.**

PCT**CHAPTER II****DEMAND**

under Article 31 of the Patent Cooperation Treaty:

The undersigned requests that the international application specified below be the subject of international preliminary examination according to the Patent Cooperation Treaty.

For International Preliminary Examining Authority use only

Identification of IPEA

Date of receipt of DEMAND

| | | |
|---|---|---|
| Box No. I IDENTIFICATION OF THE INTERNATIONAL APPLICATION | | Applicant's or agent's file reference 758.1491WOU1 |
| International application No. PCT/US03/02799 | International filing date (day/month/year) 31 January 2003 31.01.2003 | (Earliest) Priority date (day/month/year) 10 July 2002 10.07.2002 |
| Title of invention FLUTED FILTER MEDIUM AND PROCESS FOR ITS MANUFACTURE | | |
| Box No. II APPLICANT(S) | | |
| Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.) DONALDSON COMPANY, INC. 1400 West 94th Street P.O. Box 1299 Minneapolis, Minnesota 55440-1299 United States of America | | Telephone No.: Facsimile No.: Teleprinter No.: |
| State (i.e. country) of nationality: US | | State (i.e. country) of residence: US |
| Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.) GOLDEN, Patrick 199 West County Road C2 Roseville, Minnesota 55113 United States of America | | |
| State (i.e. country) of nationality: US | | State (i.e. country) of residence: US |
| Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.) REICHTER, Gregory L. 10617 Hopkins Road Bloomington, Minnesota 55420 United States of America | | |
| State (i.e. country) of nationality: US | | State (i.e. country) of residence: US |
| <input checked="" type="checkbox"/> Further applicants are indicated on a continuation sheet. | | |

Continuation of Box No. II APPLICANT(S)

If none of the following sub-boxes is used, this sheet is not to be included in the demand

Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.)

RISCH, Daniel T.
1116 136th Street West
Burnsville, Minnesota 55337
United States of America

State (i.e. country) of nationality:

US

State (i.e. country) of residence:

US

Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.)

State (i.e. country) of nationality:

State (i.e. country) of residence:

Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.)

State (i.e. country) of nationality:

State (i.e. country) of residence:

Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.)

State (i.e. country) of nationality:

State (i.e. country) of residence:

☐

Further applicants are indicated on another continuation sheet.

Box No. III AGENT OR COMMON REPRESENTATIVE; OR ADDRESS FOR CORRESPONDENCE

The following person is ☒ agent ☐ common representative

and ☒ has been appointed earlier and represents the applicant(s) also for international preliminary examination.

☐ is hereby appointed and any earlier appointment of (an) agent(s)/common representative is hereby revoked.

☐ is hereby appointed, specifically for the procedure before the International Preliminary Examining Authority, in addition to the agent(s)/common representative appointed earlier.

Name and address: *(Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.)*

BRUESS, Steven C.
Merchant & Gould P.C.
P.O. Box 2903
Minneapolis, Minnesota 55402-0903
United States of America

Telephone No.:
612/ 336-4711

Facsimile No.:
(612) 336-4751

Teleprinter No.:

☐ Mark this check-box where no agent or common representative is/has been appointed and the space above is used instead to indicate a special address to which correspondence should be sent.

Box No. IV STATEMENT CONCERNING AMENDMENTS

The applicant wishes the international Preliminary Examining Authority *

- (i) ☐ to start the international preliminary examination on the basis of the international application as originally filed.
- (ii) ☒ to take into account the amendments under Article 34 of
- ☐ the description (amendments attached).

☐ the claims (amendments attached).

☐ the drawings (amendments attached).
- (iii) ☐ to take into account any amendments of the claims under Article 19 filed with the International Bureau (a copy is attached).
- (iv) ☐ to disregard any amendments of the claims made under Article 19 and to consider them as reversed.
- (v) ☐ to postpone the start of the international preliminary examination until the expiration of 20 months from the priority date unless that Authority receives a copy of any amendments made under Article 19 or a notice from the applicant that he does not wish to make such amendments (Rule 69.1(d)). *(This check-box may be marked only where the time limit under Article 19 has not yet expired.)*

**DETAILED, NON-RATIONALIZED
EXAMINATION REQUESTED.**

* Where no check-box is marked, international preliminary examination will start on the basis of the international application as originally filed or, where a copy of amendments to the claims under Article 19 and/or amendments of the international application under Article 34 are received by the International Preliminary Examining Authority before it has begun to draw up a written opinion or the international preliminary examination report, as so amended.

Box No. V ELECTION OF STATES

☒ The applicant hereby elects all eligible States *(that is, all States which have been designated and which are bound by Chapter II of the PCT)* except

.....

.....

(If the applicant does not wish to elect certain eligible States, the name(s) or country code(s) of those States may be indicated above.)

Box No. VI CHECK LIST

The demand is accompanied by the following documents for the purposes of international preliminary examination:

- | | | | |
|----|---|---|----------|
| 1. | amendments under Article 34 | | |
| | description | : | sheets |
| | claims | : | sheets |
| | drawings | : | sheets |
| 2. | letter accompanying amendments under Article 34 | : | 2 sheets |
| 3. | copy of amendments under Article 19 | : | sheets |
| 4. | copy of statement under Article 19 | : | sheets |
| 5. | other (specify): | : | sheets |

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received not received

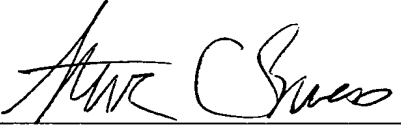
| | |
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| <input type="checkbox"/> | <input type="checkbox"/> |
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The demand is also accompanied by the item(s) marked below:

- | | | | | | |
|----|--------------------------|--|----|-------------------------------------|-----------------------|
| 1. | <input type="checkbox"/> | separate signed power of attorney | 4. | <input checked="" type="checkbox"/> | fee calculation sheet |
| 2. | <input type="checkbox"/> | copy of general power of attorney | 5. | <input type="checkbox"/> | other (specify): |
| 3. | <input type="checkbox"/> | statement explaining lack of signature | | | |

Box No. VII SIGNATURE OF APPLICANT, AGENT OR COMMON REPRESENTATIVE

Next to each signature, indicate the name of the person signing and the capacity in which the person signs (if such capacity is not obvious from reading the demand).

By 
Steven C. Bruess

For International Preliminary Examining Authority use only

- | | |
|--|---|
| 1. Date of actual receipt of DEMAND: | |
| 2. Adjusted date of receipt of demand due to CORRECTIONS under Rule 60.1(b): | |
| 3. <input type="checkbox"/> The date of receipt of the demand is AFTER the expiration of 19 months from the priority date and item 4 or 5, below, does not apply. | <input type="checkbox"/> The applicant has been informed accordingly. |
| 4. <input type="checkbox"/> The date of receipt of the demand is WITHIN the period of 19 months from the priority date as extended by virtue of Rule 80.5. | |
| 5. <input type="checkbox"/> Although the date of receipt of the demand is after the expiration of 19 months from the priority date, the delay in arrival is EXCUSED pursuant to Rule 82. | |

For International Bureau use only

Demand received from IPEA on:

PCT

CHAPTER II

FEE CALCULATION SHEET

Annex to the Demand for international preliminary examination

| | | | | | | | | | | | | | | | | | | | | | |
|--|---|---|-------------------------------|---------------------------------|---|---|---|-------------------------------------|--|---|--|--|-----|-------|--|--|--|--|-------|--|--|
| <p>International application No. PCT/US03/02799</p> <p>Applicant's or agent's file reference 758.1491WOU1</p> | <p style="text-align: center;">For International Preliminary Examining Authority use only</p> <p style="text-align: center;">Date stamp of the IPEA</p> | | | | | | | | | | | | | | | | | | | | |
| <p>Applicant</p> <p>DONALDSON COMPANY, INC.</p> | | | | | | | | | | | | | | | | | | | | | |
| <p>Calculation of prescribed fees</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 35%;">1. Preliminary examination fee</td> <td style="width: 10%; text-align: center;">EUR</td> <td style="width: 20%; border: 1px solid black; text-align: center;">1530.</td> <td style="width: 5%; border: 1px solid black; text-align: center;">P</td> <td style="width: 30%;"></td> </tr> <tr> <td>2. Handling fee (<i>Applicants from certain States are entitled to a reduction of 75% of the handling fee. Where the applicant is (or all applicants are) so entitled, the amount to be entered at H is 25% of the handling fee.</i>)</td> <td style="text-align: center;">EUR</td> <td style="border: 1px solid black; text-align: center;">129.</td> <td style="border: 1px solid black; text-align: center;">H</td> <td></td> </tr> <tr> <td>3. Total of prescribed fees Add the amounts entered at P and H and enter total in the TOTAL box</td> <td style="text-align: center;">EUR</td> <td colspan="3" style="border: 1px solid black; text-align: center;">1659.</td> </tr> <tr> <td></td> <td></td> <td colspan="3" style="border: 1px solid black; text-align: center;">TOTAL</td> </tr> </table> | | 1. Preliminary examination fee | EUR | 1530. | P | | 2. Handling fee (<i>Applicants from certain States are entitled to a reduction of 75% of the handling fee. Where the applicant is (or all applicants are) so entitled, the amount to be entered at H is 25% of the handling fee.</i>) | EUR | 129. | H | | 3. Total of prescribed fees Add the amounts entered at P and H and enter total in the TOTAL box | EUR | 1659. | | | | | TOTAL | | |
| 1. Preliminary examination fee | EUR | 1530. | P | | | | | | | | | | | | | | | | | | |
| 2. Handling fee (<i>Applicants from certain States are entitled to a reduction of 75% of the handling fee. Where the applicant is (or all applicants are) so entitled, the amount to be entered at H is 25% of the handling fee.</i>) | EUR | 129. | H | | | | | | | | | | | | | | | | | | |
| 3. Total of prescribed fees Add the amounts entered at P and H and enter total in the TOTAL box | EUR | 1659. | | | | | | | | | | | | | | | | | | | |
| | | TOTAL | | | | | | | | | | | | | | | | | | | |
| <p>Mode of Payment</p> <table style="width: 100%;"> <tr> <td><input checked="" type="checkbox"/> authorization to charge deposit account with the IPEA (see below)</td> <td><input type="checkbox"/> cash</td> </tr> <tr> <td><input type="checkbox"/> Cheque</td> <td><input type="checkbox"/> revenue stamps</td> </tr> <tr> <td><input type="checkbox"/> postal money order</td> <td><input type="checkbox"/> coupons</td> </tr> <tr> <td><input type="checkbox"/> bank draft</td> <td><input type="checkbox"/> other (<i>specify</i>):</td> </tr> </table> | | <input checked="" type="checkbox"/> authorization to charge deposit account with the IPEA (see below) | <input type="checkbox"/> cash | <input type="checkbox"/> Cheque | <input type="checkbox"/> revenue stamps | <input type="checkbox"/> postal money order | <input type="checkbox"/> coupons | <input type="checkbox"/> bank draft | <input type="checkbox"/> other (<i>specify</i>): | | | | | | | | | | | | |
| <input checked="" type="checkbox"/> authorization to charge deposit account with the IPEA (see below) | <input type="checkbox"/> cash | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Cheque | <input type="checkbox"/> revenue stamps | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> postal money order | <input type="checkbox"/> coupons | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> bank draft | <input type="checkbox"/> other (<i>specify</i>): | | | | | | | | | | | | | | | | | | | | |
| <p>Deposit Account Authorization (<i>this mode of payment may not be available at all IPEAs</i>)</p> <p>The IPEA/EP _____ <input checked="" type="checkbox"/> is hereby authorized to charge the total fees indicated above to my deposit account.</p> <p style="text-align: center;"><input checked="" type="checkbox"/> (<i>this check-box may be marked only if the conditions for deposit accounts of the IPEA so permits</i>) is hereby authorized to charge any deficiency or credit any overpayment in the total fees indicated above to my deposit account.</p> <div style="display: flex; justify-content: space-between; margin-top: 10px;"> <div> <p>2830-0082</p> <p>Deposit Account Number</p> </div> <div> <p>9 February 2004</p> <p>Date (day/month/year)</p> </div> <div style="text-align: right;"> <p>Steven C. Bruess</p> </div> </div> | | | | | | | | | | | | | | | | | | | | | |

In re application of : DONALDSON COMPANY, INC.
Application Serial No. : PCT/US03/02799
Filed : 31 January 2003 (31.01.2003)
Agent Ref. : 758.1491WOU1
Title : FLUTED FILTER MEDIUM AND PROCESS FOR ITS
MANUFACTURE

AMENDMENT UNDER ARTICLE 34 BEFORE THE
PRELIMINARY EXAMINING AUTHORITY

European Patent Office
D-80298 Munchen 2
GERMANY

Dear Sir:

Prior to Examination, Applicant requests the following remarks be considered with respect to the above-identified patent application.

Remarks Regarding Search Report

Applicants have reviewed the reference cited in the Search Report that was indicated as being a type X reference, as well as the reference indicated as being a type Y reference. It is noted that Japanese Patent Document 01171615 (identified as being a type X reference) does not illustrate the claimed "fold arrangement" including "at least four folds", as recited in claim 1. An example embodiment of the claimed fold arrangement is shown in FIG. 15. The Japanese Patent Document illustrates a dimple in FIG. 3, but not the claimed fold arrangement having at least four folds. Japanese Patent Document 04300612 illustrates corrugated media, but not the claimed fold arrangement.

Claim 10 recites a process of manufacturing filter media including deforming a portion of a corrugation to define at least one foldable tip, and then folding the at least one foldable tip over to fold the corrugation closed. Neither one of the Japanese Patent Documents illustrates this process. Japanese Patent Document 01171615 shows a dimple in FIG. 3, but does not show defining a foldable tip and then folding the foldable tip over to fold the corrugation closed. Japanese Patent Document 04300612 merely illustrates corrugated filter media.


In re application of : DONALDSON COMPANY, INC.
Application Serial No. : PCT/US03/02799
Filed : 31 January 2003 (31.01.2003)
Agent Ref. : 758.1491WOU1
Title : FLUTED FILTER MEDIUM AND PROCESS FOR ITS
MANUFACTURE

Applicants request examination and a favorable examination report.

Respectfully submitted,

MERCHANT & GOULD P.C.
P.O. Box 2903
Minneapolis, Minnesota 55402-0903
United States of America
(612) 336-4724

Dated: 9 February 2004

By 
Julie R. Daulton
USPTO Reg. No. 36,414